

County: Iron  
VILLA MARIA HEALTH & REHABILITATION CENTER  
300 VILLA DRIVE

Facility ID: 9200

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HURLEY 54534 Phone: (715) 561-3200  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 70  
Total Licensed Bed Capacity (12/31/01): 70  
Number of Residents on 12/31/01: 68

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 69

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		36.8
Supp. Home Care-Personal Care	No					1 - 4 Years		42.6
Supp. Home Care-Household Services	No	Developmental Disabilities	2.9	Under 65	2.9	More Than 4 Years		20.6
Day Services	No	Mental Illness (Org./Psy)	29.4	65 - 74	8.8			-----
Respite Care	No	Mental Illness (Other)	2.9	75 - 84	26.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	4.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.5		100.0	(12/31/01)		
Other Meals	Yes	Cardiovascular	17.6	65 & Over	97.1	-----		
Transportation	No	Cerebrovascular	19.1		-----	RNs		9.7
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		8.8
Other Services	No	Respiratory	4.4		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	17.6	Male	26.5	Aides, & Orderlies		
Mentally Ill	No		-----	Female	73.5			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

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#### Method of Reimbursement

	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	2	3.8	114	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.9
Skilled Care	5	100.0	200	48	90.6	98	0	0.0	0	10	100.0	139	0	0.0	0	0	0.0	0	63	92.6
Intermediate	---	---	---	2	3.8	82	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.9
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	1.9	128	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.5
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	5	100.0		53	100.0		0	0.0		10	100.0		0	0.0		0	0.0		68	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	2.9	Daily Living (ADL)	Independent			
Private Home/With Home Health	4.3	Bathing	0.0	32.4	67.6	68
Other Nursing Homes	22.9	Dressing	0.0	67.6	32.4	68
Acute Care Hospitals	70.0	Transferring	7.4	82.4	10.3	68
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	4.4	57.4	38.2	68
Rehabilitation Hospitals	0.0	Eating	48.5	38.2	13.2	68
Other Locations	0.0	*****				
Total Number of Admissions	70	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	1.5	Receiving Respiratory Care		7.4
Private Home/No Home Health	4.2	Occ/Freq. Incontinent of Bladder	61.8	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	47.2	Occ/Freq. Incontinent of Bowel	33.8	Receiving Suctioning		0.0
Other Nursing Homes	4.2			Receiving Ostomy Care		2.9
Acute Care Hospitals	4.2	Mobility		Receiving Tube Feeding		5.9
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	14.7	Receiving Mechanically Altered Diets		17.6
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	40.3	With Pressure Sores	0.0	Have Advance Directives		72.1
Total Number of Discharges		With Rashes	5.9	Medications		
(Including Deaths)	72			Receiving Psychoactive Drugs		50.0

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	98.6	80.3	1.23	85.1	1.16	84.4	1.17	84.6	1.17
Current Residents from In-County	42.6	72.7	0.59	72.2	0.59	75.4	0.57	77.0	0.55
Admissions from In-County, Still Residing	8.6	18.3	0.47	20.8	0.41	22.1	0.39	20.8	0.41
Admissions/Average Daily Census	101.4	139.0	0.73	111.7	0.91	118.1	0.86	128.9	0.79
Discharges/Average Daily Census	104.3	139.3	0.75	112.2	0.93	118.3	0.88	130.0	0.80
Discharges To Private Residence/Average Daily Census	53.6	58.4	0.92	42.8	1.25	46.1	1.16	52.8	1.02
Residents Receiving Skilled Care	95.6	91.2	1.05	91.3	1.05	91.6	1.04	85.3	1.12
Residents Aged 65 and Older	97.1	96.0	1.01	93.6	1.04	94.2	1.03	87.5	1.11
Title 19 (Medicaid) Funded Residents	77.9	72.1	1.08	67.0	1.16	69.7	1.12	68.7	1.13
Private Pay Funded Residents	14.7	18.5	0.79	23.5	0.63	21.2	0.69	22.0	0.67
Developmentally Disabled Residents	2.9	1.0	2.96	0.9	3.26	0.8	3.73	7.6	0.39
Mentally Ill Residents	32.4	36.3	0.89	41.0	0.79	39.5	0.82	33.8	0.96
General Medical Service Residents	17.6	16.8	1.05	16.1	1.10	16.2	1.09	19.4	0.91
Impaired ADL (Mean)	60.3	46.6	1.29	48.7	1.24	48.5	1.24	49.3	1.22
Psychological Problems	50.0	47.8	1.05	50.2	1.00	50.0	1.00	51.9	0.96
Nursing Care Required (Mean)	5.0	7.1	0.69	7.3	0.68	7.0	0.71	7.3	0.68